

INFANT SLEEP SAFETY



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LEARNING OBJECTIVES

- Discuss and disambiguate SIDS and SUID
- Review expanded AAP guidelines
- Review sleep myths



SUID (SUDDEN UNEXPLAINED INFANT DEATH)

Sudden Infant Death Syndrome (SIDS)

- Unknown cause, however there are known risk factors
- Not “preventable”, but risks could have been reduced
- Coded as “natural” cause of death

Accidental Suffocation and Strangulation in Bed (ASSB)

- Caused by an unsafe sleep environment
- Preventable
- Coded as “accidental” cause of death

Undetermined

- Unknown cause
- Cases often have evidence of unsafe sleep environment
- Often (but not always) preventable
- Coded as “unknown” cause of death

Common SIDS and SUID Terms and Definitions. (2017, August 11). Retrieved from

<https://www1.nichd.nih.gov/sts/about/SIDS/Pages/common.aspx>



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SIDS (SUDDEN INFANT DEATH SYNDROME)

- Defined as the sudden death of an infant younger than one year of age that remains unexplained after a complete investigation including:
 - Complete autopsy
 - Examination of the death scene
 - Review of the infant's and families' clinical histories
- Common SIDS and SUID Terms and Definitions. (2017, August 11). Retrieved from <https://www1.nichd.nih.gov/sts/about/SIDS/Pages/common.aspx>

SAFE SLEEP PRACTICES

- Complete autopsy
- OSDH promotes the AAP safe sleep guidelines:
<http://pediatrics.aappublications.org/content/138/5/e20162938>
- AAP makes A, B, and C level recommendations (levels indicate level of rigor: A= high quality consistent scientific evidence, B= limited but emerging scientific evidence, C= mostly expert opinion with few research studies conducted yet)

AAP SAFE SLEEP RECOMMENDATIONS

A level recommendations

- Babies are safest on their back
- Firm sleep surfaces protect against suffocation
- Breastfeeding (when possible) can reduce SIDS risk by 50% (Vennemann et al, 2009)
- Room-sharing with the infant on a separate sleep surface outside of the bed can allow parents to be more attentive to the child's needs while maintaining safe sleep habits



AAP SAFE SLEEP RECOMMENDATIONS

A level recommendations

- Keeping the crib free of anything but the baby, pacifier, and a fitted sheet keeps their sleep environment safest
- Consider offering a pacifier at naptime and bedtime (after breastfeeding is established) to further reduce SIDS risk
- Set “smoke-free” rules around you and your baby before and after birth to keep tobacco smoke away from you and your baby’s environment to prevent risks of tobacco use
- Avoid alcohol and illicit drug use during pregnancy and after birth.



AAP SAFE SLEEP RECOMMENDATIONS

B level recommendations

- AAP recommends to avoid the use of “smart” baby monitoring devices
 - This describes devices such as Smart diaper clips, smart onesies, smart socks, and smart leg monitors
- The concern about these devices is twofold:
 - First: most aren’t evaluated for safety, accuracy, or efficacy by the FDA as other medical devices are. Consumer medical apps have a record of being dangerously inconsistent
 - Second: a faulty smart baby monitor could falsely reassure parents that an ailing baby is healthy, or alarm parents that a healthy baby is sick.



AAP SAFE SLEEP RECOMMENDATIONS

B level recommendations

- Supervised, awake tummy time is recommended to facilitate development and to minimize development of positional plagiocephaly.

The Magic of TUMMY TIME!!

Before You Start:

- Baby awake and alert
- Use a firm surface
- Baby should be supervised at all times

BACK

- Posture strength
- Back strength
- Skeletal alignment

NECK

- Strengthens neck muscles
- Improves head control

BRAIN

- Sensory integration
- Cognitive development
- Environmental awareness

HEAD

- Prevents flat head syndrome (plagiocephaly)

EYES

- Visual motor development
- Depth perception

ARMS

- Strengthens arms for reaching and crawling

LEGS

- Helps develop muscles for crawling

HIPS

- Stretches/develops hips muscles

TUMMY

- Helps with tummy issues (gas, constipation)

HANDS

- Formation of hand arches for fine motor skills

Include in Daily Activities:

- Towel drying after bath
- After diaper changes
- Burping over parent's lap
- On parent's chest
- Lotion/Massage
- Playing "airplane"
- Mirror play



www.babybegin.com



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AAP SAFE SLEEP RECOMMENDATIONS

C level recommendations

- Swaddling: while swaddling can be helpful with soothing and calming babies to sleep in the first few months, there is no evidence to recommend swaddling as a strategy to reduce the risk of SIDS.
- Use a sleep sack in lieu of a swaddling blanket whenever possible
- AAP recommends swaddling stop by 2 months or before the baby intentionally starts to roll over due to risk of suffocation
- Swaddling decreases arousal; this can be a problem in that decreased arousal is one of the main theories regarding why babies die of SIDS
- Swaddling improperly can lead to hip dysplasia

PROTECTIVE FACTORS

Pacifier use after breastfeeding is established; without any strings or attachments do to choking or strangulation hazard



PROTECTIVE FACTORS

- Breastfeeding till 12 months when possible
- Regular tummy time when baby is awake
- Skin-to-skin contact for newborns
- Room sharing (not bed sharing)
- Utilizing a sleep sack for naps/bedtime
- Regular prenatal care during pregnancy
- Keeping up-to-date with immunizations
- Interaction with well-educated peers and individuals in positions of authority

SAFE SLEEP PRACTICES

Room sharing vs bed-sharing



ROOM SHARING VS BED-SHARING

- Room sharing is a protective factor that has been shown to decrease risk of SIDS by 50% (Leach, et al 1999)
- Infants should also not sleep with other babies, children, or pets

Bed-sharing is not recommended due to enhanced risk factors such as:

- Adult mattresses are often not a firm surface
- Risk of overlaying/risk of gaps baby can roll into
- Risk of entrapment against a pillow or in between bed and wall
- Risks of overheating



OVERHEATING

- Overheating can lead to increased SIDS risk due to reduced arousal
- Soft surfaces lead to overheating
- Head covering can lead to overheating
- Be careful not to overcompensate for colder temperatures in the winter
- In general, if the temperature in the room is comfortable for an adult, it is appropriate for a baby

SAFE SLEEP PRACTICES

What is a firm sleep surface?

- A firm mattress with a fitted sheet
- Crib, bassinet, portable crib (pack n 'play)
- Has to meet CPSC (Consumer Product Safety Commission) safety standards
- Use mattresses designed for that product; no gaps



SAFE SLEEP PRACTICES

- A firm mattress with a fitted sheet
- Bedside sleepers and baby boxes are not recommended at this time due to lack of research showing effectiveness and lack of safety standards
- Garage sale cribs/hand me down cribs are not recommended due to unknown age relative to recent safety standards

ON CO-SLEEPING

- I am required to give instruction based on current AAP guidelines, however remember that those can/may change (i.e.; putting babies on their side was once recommended)
- Current guidelines continue to recommend against so that is why I follow these.
- What about Japan?
 - Maternal smoking rate and alcohol consumption is considerably lower
 - Much lower obesity rates
 - Sleeping practices are significantly different (hard mattress on the floor)

URGENT SAFETY NOTICE

Fisher-Price Rock 'n Play Sleeper •



- AAP Statement has recommended that Fisher-Price recall the product immediately, they have recently done so
- The Consumer Safety Products Commission (CSPC) has stated to stop using after 3 months (or rollover), but AAP says this does not go far enough due to deaths prior to this age
- The most likely impact from this product is asphyxia due to sleep position

**There have been reports of 32
sleep-related infant deaths
according to a consumer
reports analysis**



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CPSC RECALLS!

The SwaddleMe By Your Bed Sleeper recalled 1/29/2020

Graco Little Lounger Rocking Seat recalled 1/29/2020

Evenflo Pillo Portable Napper Inclined Sleepers recalled 1/29/2020

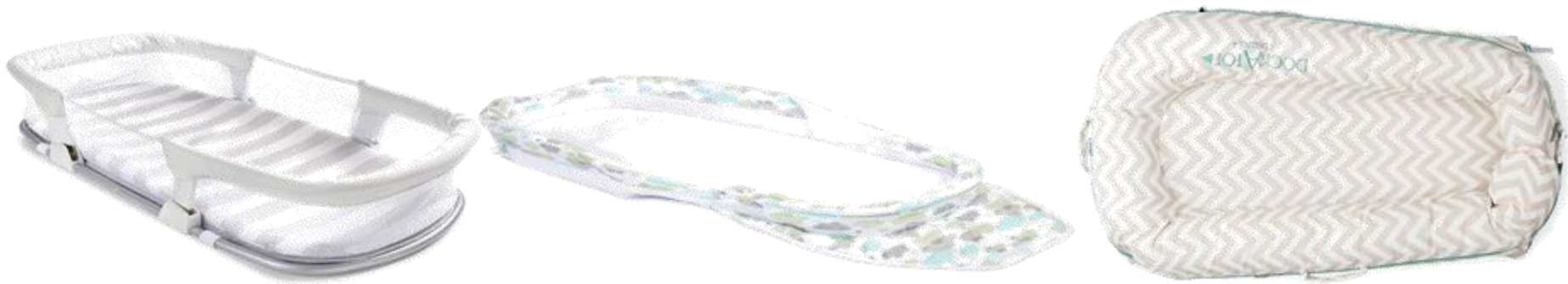
Delta Incline Sleeper with Adjustable Feeding Position for Newborns recalled 1/29/2020



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OTHER UNSAFE SLEEPING ENVIRONMENTS

- **SwaddleMe** By Your Side Sleeper, which is made by SUMR Brands and has a flat mattress and low mesh sidewalls.
- **Baby Delight Snuggle Nest Infant Sleeper**
- **DockATot**, which looks similar to a small raft, and has a soft side bumper.



CRIB OBSERVATION



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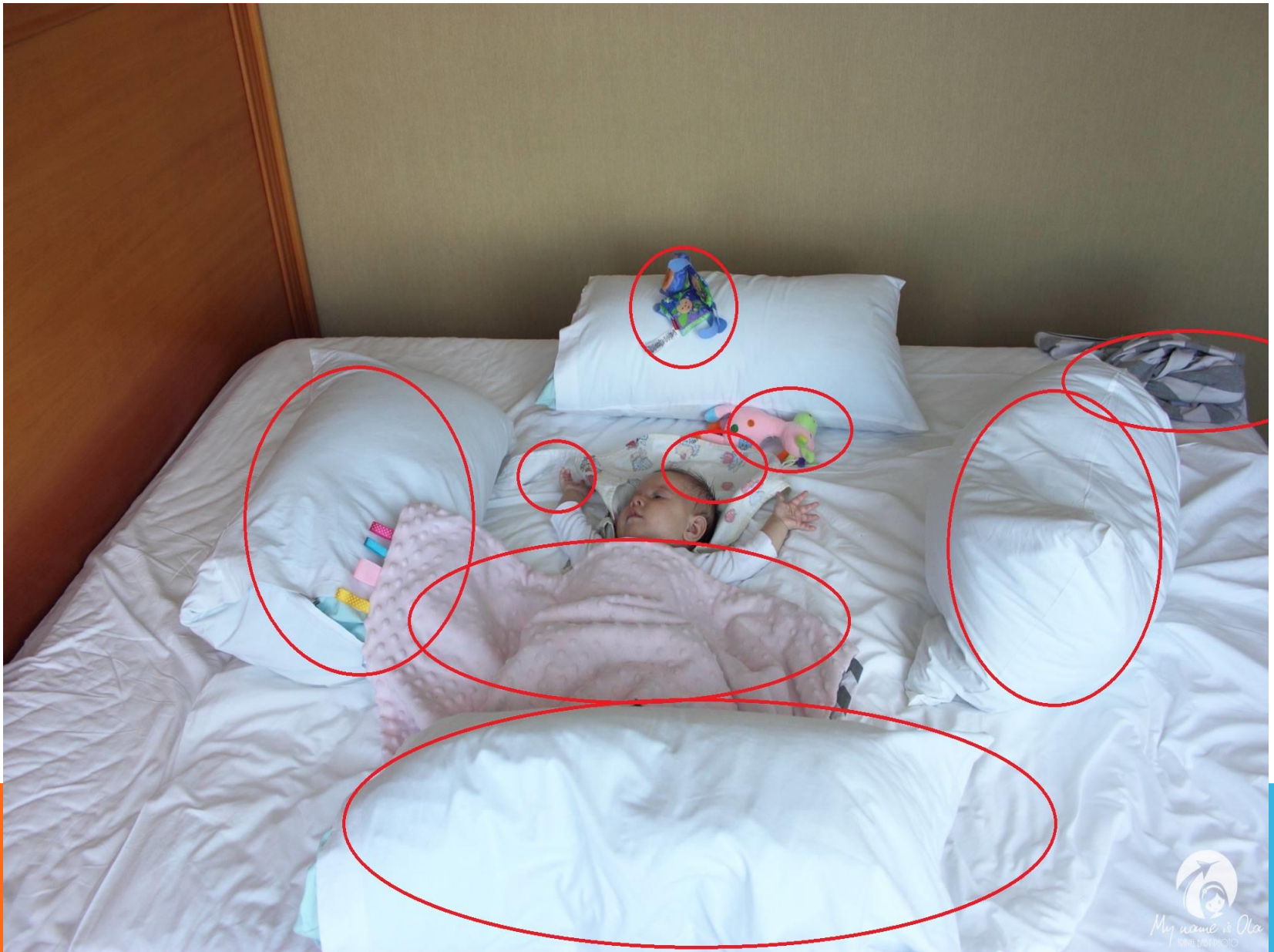
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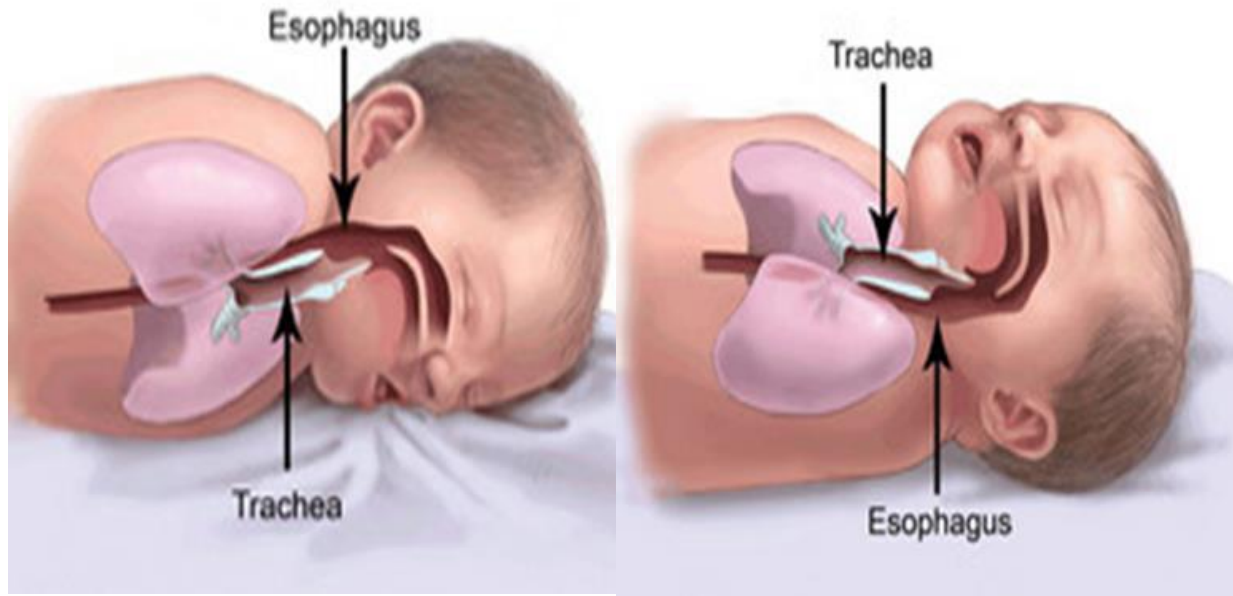
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COMMON REASONS WHY PARENTS DO NOT PUT THEIR BABY ON THEIR BACK TO SLEEP

- 1) Belief that baby could choke/aspirate
- 2) Belief that side sleeping is equally safe
- 3) Belief that baby does not sleep well in this position
- 4) Belief that a baby will get a flat head
- 5) Belief that propping the baby up will help with reflux or congestion



1) WHAT IF MY BABY CHOKES WHILE SLEEPING ON HIS BACK?



The trachea is above the esophagus when baby is on their back
It would be difficult for vomit/spit-up to travel against gravity
There are folds that direct fluids back into the esophagus



2) BELIEF THAT SIDE SLEEPING IS EQUALLY SAFE



- Side sleepers have a two-fold greater risk of SIDS
- The side is an unstable position in which an infant could easily roll onto their stomach
- AAP guidelines state that side sleeping is not as safe as back sleeping and is not advised



3) WHAT IF THE BABY WON'T SLEEP ON HER/HIS BACK?

- Work on learning the baby's cues to assess why they are fussy (hunger, dirty/wet diaper, teething, etc.)
- Place the crib/bassinet near your bed
- Utilize routine
- Keep stimulus low at night (minimal interaction and keep room dark)
- Use a white noise machine
- Remember that newborns and young infants sleep often, but irregularly

4) BELIEF THAT A BABY WILL GET A FLAT HEAD

- Alternate the arm used to hold the baby
- Hold the baby upright when he or she is not sleeping (this is sometimes called “cuddle time”)
- Change the direction your baby lies in the crib from one week to the next (for example, have your baby’s feet point toward one end of the crib one week, and then have the feet point toward the other end of the crib the next week)
- Flat head (positional plagiocephaly) is temporary, cosmetic, and typically resolves on its own without any medical intervention



THANK YOU!



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- Task Force On Sudden Infant Death Syndrome (2011) 'SIDS and other sleep-related infant deaths: Expansion of recommendations for a safe infant sleeping environment', *Paediatrics* 128, pp.1030-1039.
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